

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
State: FLORIDA

INCOME ELIGIBILITY LEVELS

A. MANDATORY CATEGORICALLY NEEDY

1. AFDC-Related Groups Other Than Poverty Level Pregnant Women and Infants:

STANDARDS WITH AND WITHOUT SHELTER

FAMILY SIZE	NEED STANDARD	CHART I	CHART II	CHART III
		PAYMENT STANDARD WITH MORE THAN \$50 SHELTER	PAYMENT STANDARD WITH \$.01 - \$50 SHELTER	PAYMENT STANDARD WITH \$0 SHELTER
1	645	180	153	95
2	864	241	205	158
3	1082	303	258	198
4	1300	364	309	254
5	1519	426	362	289
6	1737	487	414	346
7	1955	549	467	392
8	2174	610	519	438
9	2392	671	570	485
10*	2610(1)	733(2)	623(3)	534(4)

* Adjustment for each addition. (1) \$219 (2) \$62 (3) \$52 (4) \$48

2. Pregnant Women and Infants under Section 1902(a)(10)(i)(IV) of the Act:

Effective May 1, 1992, based on the following percent of the official Federal income poverty level --

/_/_ 133 percent /_/_ 185 percent (no more than 185 percent)
(specify)

Family Size

Income Level

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Georgia

INCOME ELIGIBILITY LEVELS

A. MANDATORY CATEGORICALLY NEEDY (Continued)

3. For children under Section 1902(a)(10)(i)(VI) of the Act (children who have attained age 1 but have not attained age 6), the income eligibility level is 133 percent of the Federal poverty level (as revised annually in the Federal Register) for the size family involved.

4. For children under Section 1902(a)(10)(i)(VII) of the Act (children who were born after September 30, 1983 and have attained age 6 but have not attained age 19), the income eligibility level is 100 percent of the Federal poverty level (as revised annually in the Federal Register) for the size family involved.

1902(a)
(52) and
1925 of
the Act

5. Families terminated from AFDC solely because of earnings, hours of employment, or loss of earned income disregards entitled up to twelve months of extended benefits in accordance with Section 1925 of the Act. (This provision expires on September 30, 1995.) The income eligibility level during the second six month extension of the twelve months is 185 percent of the Federal poverty level (as revised annually in the Federal Register for the size family involved).

TN No. 93-007

Supersedes

TN No. 92-19

Approval Date

MAY 4 1993

Effective Date

JAN 1 1993

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Georgia

INCOME ELIGIBILITY LEVELS (Continued)

B. OPTIONAL CATEGORICALLY NEEDY GROUPS WITH INCOMES RELATED TO
FEDERAL POVERTY LEVEL

1. Pregnant Women and Infants

The levels for determining income eligibility for optional groups of pregnant women and their infants under the provisions of sections (a) (1) (A) (ii) and 1902 (1) (2) of the Act are as follows:

Based on 200 percent of the official Federal income poverty level (no less than 133 percent and no more than 200 percent).

- Refer to SUPPLEMENT 8A to Attachment 2.6-A

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: GeorgiaINCOME ELIGIBILITY LEVELS (Continued)

B. CATEGORICALLY NEEDY GROUPS WITH INCOMES RELATED TO FEDERAL POVERTY LEVEL

2. Children born after September 30, 1983 but not yet age 19:

The levels for determining income eligibility for groups of children who are born after September 30, 1983, but have not reached age 19.

Based on 100 percent (no more than 100 percent) of the official Federal income poverty line.

1902(1)(2)	<u>Family Size</u>	<u>Income Level</u>
	<u>1</u>	<u>\$ 552</u>
	<u>2</u>	<u>\$ 740</u>
	<u>3</u>	<u>\$ 929</u>
	<u>4</u>	<u>\$1117</u>
	<u>5</u>	<u>\$1305</u>
	<u>6</u>	<u>\$1494</u>
	<u>7</u>	<u>\$1682</u>
	<u>8</u>	<u>\$1870</u>
	<u>9</u>	<u>\$2059</u>
	<u>10</u>	<u>\$2247</u>

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE Georgia

INCOME ELIGIBILITY LEVELS - MANDATORY GROUP OF QUALIFIED
DISABLED AND WORKING INDIVIDUALS WITH INCOMES UP TO FEDERAL
POVERTY LINE

The levels for determining income eligibility for groups of
qualified disabled and working individuals under the provisions
of section 1905(s) of the Act are as follows:

Based on 200 percent of the official Federal income poverty
line.

TN No. 90-30
Supersedes
TN No. (New)

Approval Date 10-19-90

Effective Date 7-1-90

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Georgia

INCOME ELIGIBILITY LEVELS (Continued)

3. Aged and Disabled Individuals

The levels for determining income eligibility for groups of aged and disabled individuals under the provisions of section 1902(m)(4) of the Act are as follows:

Based on _____ percent of the official Federal income poverty line.

<u>Family Size</u>	<u>Income Level</u>
<u>1</u>	\$ _____
<u>2</u>	\$ _____
<u>3</u>	\$ _____
<u>4</u>	\$ _____
<u>5</u>	\$ _____

If an individual receives a title II benefit, any amount attributable to the most recent increase in the monthly insurance benefit as a result of a title II COLA is not counted as income during a "transition period" beginning with January, when the title II benefit for December is received, and ending with the last day of the month following the month of publication of the revised annual Federal poverty level.

For individuals with title II income, the revised poverty levels are not effective until the first day of the month following the end of the transition period.

For individuals not receiving title II income, the revised poverty levels are effective no later than the beginning of the month following the date of publication.

TN No. 92-12
Supersedes
TN No. 91-31

Approval Date 5/20/92

Effective Date 4/1/92

HCFA ID: 7985E

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: GeorgiaINCOME ELIGIBILITY LEVELS (Continued)

C. QUALIFIED MEDICARE BENEFICIARIES AND QUALIFIED DISABLED AND WORKING INDIVIDUALS WITH INCOMES RELATED TO FEDERAL POVERTY LEVEL

The levels for determining income eligibility for groups of qualified Medicare beneficiaries under the provision of Section 1905(p)(2)(A) of the Act are as follows:

1. NON-SECTION 1902(f) STATES

a. Based on the following percent of the official Federal income poverty level:

Eff. Jan. 1, 1989:	<u> </u>	85 percent	<u> </u>	percent (no more than 100)
Eff. Jan. 1, 1990:	<u> </u>	90 percent	<u> </u>	percent (no more than 100)
Eff. Jan. 1, 1991:	<u>100</u>	percent		
Eff. Jan. 1, 1992:	<u>100</u>	percent		

b. Levels:

Family SizeIncome Levels1*100 percent of the poverty level
effective March 1 of each year.2*100 percent of the poverty level
effective March 1 of each year.

*Title II cost-of-living increases will be disregarded for the months of January, February and March of each year for QMB's only.

No. 91-31 Approval Date 12-18-91 Effective Date 10-1-91
Supersedes
TN No. NEW

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: GeorgiaINCOME ELIGIBILITY LEVELS (Continued)

C. QUALIFIED MEDICARE BENEFICIARIES AND QUALIFIED DISABLED AND WORKING INDIVIDUALS WITH INCOMES RELATED TO FEDERAL POVERTY LEVEL

2. SECTION 1902(f) STATES WHICH AS OF JANUARY 1, 19⁸⁷~~89~~ USED INCOME STANDARDS MORE RESTRICTIVE THAN SSI

a. Based on the following percent of the official Federal income poverty level:

Eff. Jan. 1, 1989:	<u> </u>	85 percent	<u> </u>	percent (no more than 100)
Eff. Jan. 1, 1990:	<u> </u>	90 percent	<u> </u>	percent (no more than 100)
Eff. Jan. 1, 1991:	<u> </u>	95 percent	<u> </u>	percent (no more than 100)
Eff. Jan. 1, 1992:	<u> </u>	100 percent		

b. Levels:

Family SizeIncome Levels 1
 2 \$
\$ 3. NON-SECTION 1902(f) STATES

The levels for determining income eligibility for qualified disabled and working individuals under provisions of 1905(s) of the Act are as follows:

a. Based on the following percent of the official Federal income poverty level:

Eff. Jan. 1, 1990: 200 percent

b. Levels:

Family SizeIncome Levels 1
 2 200 percent of the poverty level
effective March 1 of each year.
200 percent of the poverty level
effective March 1 of each year.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: GEORGIA

INCOME LEVELS (Continued)

D. MEDICALLY NEEDY

☒ Applicable to all groups. ☐ Applicable to all groups except those specified below. Excepted group income levels are also listed on an attached page 3.

(1)	(2)	(3)	(4)	(5)
Family Size	Net income level protected for maintenance for _____ months	Amount by which Column (2) exceeds limits specified in 42 CFR	Net income level for persons living in rural areas for _____ months	Amount by which Column (4) exceeds limits specified in 42 CFR
<input type="checkbox"/> urban only		435.1007 ^{1/}		435.1007 ^{1/}
<input type="checkbox"/> urban & rural				
1	\$ 208	\$	\$	\$
2	\$ 317	\$	\$	\$
3	\$ 375	\$	\$	\$
4	\$ 442	\$	\$	\$

For each additional person, add:

\$ 50 \$ \$ \$

^{1/} The agency has methods for excluding from its claim for FFP payments made on behalf of individuals whose income exceeds these limits.

TN No. 91-31

Supersedes

TN No. NEW

Approval Date 12-18-91

Effective Date 10-1-91

HCFA ID: 7985E

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
State: GEORGIA

INCOME LEVELS (Continued)

D. MEDICALLY NEEDY

(1) Family Size	(2) Net income level protected for maintenance for _____ months	(3) Amount by which Column (2) exceeds limits specified in 42 CFR 435.1007 ^{1/}	(4) Net income level for persons living in rural areas for _____ months	(5) Amount by which Column (4) exceeds limits specified in 42 CFR 435.1007 ^{1/}
<input type="checkbox"/> urban only				
<input checked="" type="checkbox"/> urban & rural				
5	\$ 508	\$	\$	\$
6	\$ 550	\$	\$	\$
7	\$ 600	\$	\$	\$
8	\$ 633	\$	\$	\$
9	\$ 667	\$	\$	\$
10	\$ 708	\$	\$	\$

For each
addi-
tional
person,
add:

\$ 50 \$ \$ \$

^{1/} The agency has methods for excluding from its claim for FFP payments made on behalf of individuals whose income exceeds these limits.

91-31
TN No. 31-91
Supersedes
TN No. NEW

Approval Date 12-18-91

Effective Date 10-1-91

HCFA ID: 7985E